

IN RE: : CASE NO. 19-21165-JAD
Leslie Lyons, : CHAPTER 13
Kathy Lyons, :
Debtors :
:
Leslie Lyons, :
Kathy Lyons, :
Movants :
:
vs. :
Aaa Debt Rec and all Parties of Interest :
Ronda J. Winnecour, Esquire, :
Chapter 13 Trustee, :
Respondent :

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

_____ Voluntary Petition *Specify reason for amendment:*
_____ Official Form 6 Schedules (Itemization of Changes Must Be Specified)
_____ Summary of Schedules
_____ Schedule A – Real Property
_____ Schedule B – Personal Property
_____ Schedule C – Property Claimed as Exempt
_____ Schedule D – Creditors holding Secured Claims
_____ Check One:
_____ Creditor(s) Added
_____ NO creditor(s) Added
_____ Creditor(s) Deleted
_____ Schedule E – Creditors Holding Unsecured Priority Claims
_____ Check One:
_____ Creditor(s) Added
_____ NO creditor(s) Added
_____ Creditor(s) Deleted
_____ Schedule F – Creditors Holding Unsecured Nonpriority Claims
_____ Check One:
_____ Creditor(s) Added
_____ NO creditor(s) Added
_____ Creditor(s) Deleted
_____ Schedule G – Executory Contracts and Unexpired Leases
_____ Check One:
_____ Creditor(s) Added
_____ NO creditor(s) Added
_____ Creditor(s) Deleted
_____ Schedule H – Codebtors
_____ X Schedule I – Current Income of Individual Debtor(s)
_____ Schedule J – Current Expenditures of Individual Debtor(s)
_____ Statement of Financial Affairs
_____ Chapter 7 Individual Debtor’s Statement of Intention
_____ Chapter 11 List of Equity Security Holders
_____ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims
_____ Disclosure of Compensation of Attorney for Debtor
_____ Other:_____

Pursuant to Fed.R.Bankr.P.1009(a) and Local Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

Aaa Debt Rec
Pob 129
Monroeville, PA 15146

PA American Water
PO Box 578
Alton, IL 62002

Bureau Of Account Mana
Bureau Of Account
Camp Hill, PA 17011

PA American Water
PO Box 371412
Pittsburgh, PA 15250

Capital One
PO Box 30281
Salt Lake City, UT 84130

Peoples Gas Bankruptcy Dept.
375 N Shore Drive Ste 600
Attn: Dawn Linder
Pittsburgh, PA 15212

City and School District of Pittsburgh
c/o Goehring Rutter & Boehm
437 Grant Street, 14th Floor
Pittsburgh, PA 15219

Pittsburgh Water & Sewer
C/O Jordan Tax
102 Rahway Street
McMurray, PA 15317

Duquense Light Company
c/o Keri P. Ebeck Bernstien & Burkley PC
707 Grant Street Ste. 2200
Pittsburgh, PA 15219

Professional Credit Se
Po Box 7548
Springfield, OR 97475

First Commonwealth Bank
601 Philadelphia St
Indiana, PA 15701

PYOD LLC
C/O Resurgnet Capital
PO Box 19008
Greenville, SC 29602

Goehring, Rutter & Boehm
437 Grant Street 14th FL
Pittsburgh, PA 15219

Rushmore Loan Management
P.O. Box 52708
Irvine, CA 92619

Jefferson Capital
PO BOX 7999
Saint Cloud, MN 56302

Rushmore Loan Management
P.O. Box 55004
Irvine, CA 92619

Jordan Tax Service, Inc.
102 Rahway Road
Canonsburg, PA 15317

Td Auto Finance
Po Box 9223
Farmington Hills, MI 48333

KML
701 Market Street, Suite 5000
Philadelphia, PA 19106

Verizon
500 Technology Dr
Weldon Spring, MO 63304

LVNV Funding
Resurgent Capital Services
PO Box 10587
Greenville, SC 29603-0587

Wilmington Savings Fund Society
15480 Laguna Cnayon Road
Suite 100
Irvine, CA 92618

Markone Financial Llc
P O Box 17038
Jacksonville, FL 32245

Date: November 11, 2020

/s/ Paul W. McElrath
Paul W. McElrath, Esquire
Attorney for Debtor
P.A. Id. No. 86220
The Law Offices of Paul McElrath
1641 Saw Mill Run Blvd
Pittsburgh, PA 15210
(412) 765-3606
paulm@mcelrathlaw.com

Fill in this information to identify your case:

Debtor 1 Leslie Lyons

Debtor 2 Kathy Lyons
(Spouse, if filing)

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number 19-21165-JAD
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.	Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
	Occupation	<u>disabled</u>	<u>disabled</u>
	Employer's name		
	Employer's address		
	How long employed there?		

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>

Debtor 1 **Leslie Lyons**
Debtor 2 **Kathy Lyons**Case number (if known) **19-21165-JAD**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 1,054.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 1,054.00	\$ 899.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Daughter's Social Security Benefits	8f. \$ 426.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify:	8h.+ \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 2,534.00	\$ 899.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,534.00 + \$ 899.00	= \$ 3,433.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	3,433.00
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

Combined monthly income